SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: C&J Associates Pest Control PO Box 8186 	A. Signature X Addressee B. Received by (Printed Name) C. Date of Opinipery D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
Montgomery, AC 36110 Ducy 884 73 order	3. Service Type Certified Mail Registered Return Receipt for Merchandise C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7006 2760 0002 8193 4300 (Transfer from service label)	
PS Form 3811 February 2004 Domestic Ret	urn Receipt 102595-02-M-1540